

## **Application Data Sheet**

### **Application Information**

Application number::	Not yet assigned
Filing Date::	12/06/01
Application Type::	Regular
Subject Matter::	Utility
Sequence Submission::	Yes
Computer Readable Form (CRF)?::	Yes
Number of copies of CRF::	1
Title::	REGULATION OF ANGIOGENESIS WITH ZINC FINGER PROTEINS
Attorney Docket Number::	019496-005830US
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	3A
Total Drawing Sheets::	27
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Edward
Middle Name::	
Family Name::	Rebar
Name Suffix::	
City of Residence::	El Cerrito
State or Province of Residence::	CA

Country of Residence:: US  
Street of Mailing Address:: 1609 Roger Court  
City of Mailing Address:: El Cerrito  
State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 94530

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United Kingdom  
Status:: Full Capacity  
Given Name:: Andrew  
Middle Name::  
Family Name:: Jamieson  
Name Suffix::

City of Residence:: San Francisco  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 2528 Sutter Street  
City of Mailing Address:: San Francisco  
State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 94115

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Qiang  
Middle Name::  
Family Name:: Liu

Name Suffix::

City of Residence:: Foster City

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 55 Williams Lane

City of Mailing Address:: Foster City

State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94404

Applicant Authority Type:: Inventor

Primary Citizenship Country:: China

Status:: Full Capacity

Given Name:: Pei-Qi

Middle Name::

Family Name:: Liu

Name Suffix::

City of Residence:: Richmond

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 2266 Bristlecone Drive

City of Mailing Address:: Richmond

State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94803

Applicant Authority Type:: Inventor

Primary Citizenship Country:: United Kingdom

Status:: Full Capacity

Given Name:: Alan  
Middle Name::  
Family Name:: Wolffe  
Name Suffix::  
City of Residence:: Orinda  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 155 Alice Lane  
City of Mailing Address:: Orinda  
State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 94563

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Stephen  
Middle Name:: P.  
Family Name:: Eisenberg  
Name Suffix::  
City of Residence:: Boulder  
State or Province of Residence:: CO  
Country of Residence:: US  
Street of Mailing Address:: 5664 Pennsylvania Place  
City of Mailing Address:: Boulder  
State or Province of mailing address:: CO  
Country of mailing address::  
Postal or Zip Code of mailing address:: 80303

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Eric  
Middle Name::  
Family Name:: Jarvis  
Name Suffix::  
City of Residence:: Boulder  
State or Province of Residence:: CO  
Country of Residence:: US  
Street of Mailing Address:: 2265 Dartmouth Avenue  
City of Mailing Address:: Boulder  
State or Province of mailing address:: CO  
Country of mailing address::  
Postal or Zip Code of mailing address:: 80305

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Designation::	Representative Number::	Representative Name::
Primary	37,505	Joe Liebeschuetz
Associate	41,303	Andrew T. Serafini

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	09/846,033	04/30/01
	Continuation-in-part of	09/736,083	12/12/00

**Assignee Information**

Assignee Name:: Sangamo BioSciences, Inc.  
Building of mailing address:: Point Richmond Tech Center  
Street of mailing address:: 501 Canal Blvd., Suite A100  
City of mailing address:: Richmond  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94804